

McPhail Field

Policies & Application
Scottville Recreation Department
105 N Main St. Scottville, MI 49454
231-757-4729

- 1. Fees(s) are required for use of field(s), and are as follows:
- *\$300 Deposit is required.

 All or part of deposit will be refunded following your event, upon inspection.
- *\$50 Per Day, Per Field Non-refundable, required prior to your event.
- * Use of concession stand must be additionally requested.
- * Restrooms available on site.
- 2. Fields, restrooms, and surrounding area must be cleared of trash/debris following use. Containers and bags are provided for your convenience. Deposit will not be returned unless fields, restrooms and surrounding areas are clean.
- 3. A schedule of games/practices must be provided to the recreation department.
- 4. Proof of liability insurance, and a signed waiver form must be provided.
- 5. The following are prohibited on McPhail property:
- *Sale of alcoholic beverages
- *Profane music
- *Pets
- *The use of firearms, or weapons of any kind, fireworks.
- *Soliciting
- *Camping
- *Reservation of tennis courts

I	Person/Organization Name
A	Address:
- I	Phone:
I	Date & Time of Use:
I	Planned Use:
I	Estimated # of Attendees:
Š	Signature:
facilities is and anyone inherent risl may volunta and all injur McPhail Fic representati all injury to activities coindemnify tincluding at to have been use of the Munderstand	Liability Statement for use of McPhail Field ation of my use of McPhail Field, and with the understanding that my use of the only on the condition that I enter into this agreement for myself, family, heirs, assigns else on the premises as part of my event or organization, I hereby assume the ks involved in use of the facilities connected with the use of McPhail Field in which I arily participate. I expressly assume the risk of an accept full responsibility for any ries (including death) and accidents, which may occur as a result of my use of eld and release from liability the City of Scottville and each of their officers, agents, twes and employees. I hereby wave any claim I may hereafter have because of any and my person or property as a result of my use of the facilities and in any other onnected with McPhail Field in which I may voluntarily participate. I hereby agree to the City of Scottville and each of all the above-named persons for all claims, ttorney fees and costs, which may be brought against any of them by anyone claiming in injured as a result of any injury me or my property which may occur as a result of McPhail Field facilities. By signing this waiver, I certify that I have read and fully this release. Date Date
]	Office Use Only Payments should be made to City of Scottville with memo reference to McPhail reservations. Return to 105 N Main St. Attn: Kelse Lester
]	Received byAmountDate